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000116 7590 01/20/2004

PEARNE & GORDON LLP
1801 EAST 9TH STREET
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CLEVELAND, OH 44114-3108

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Susan K. Naughton

(Depositor's name)

Susan K. Naughton

(Signature)

4-6-04

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/836,617	04/17/2001	Takahiro Osada	33498	7813

TITLE OF INVENTION: ROTOR YOKE HAVING A RING -LIKE INDUCTOR FORMING MEMBER FOR AN ELECTRIC MACHINE ROTOR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	04/20/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
CUEVAS, PEDRO J	2834	310-156280

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☒ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Pearne & Gordon LLP

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Kokusan Denki Co., Ltd.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Shizuoka-Ken, JapanPlease check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ Corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

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☒ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by _____ to charge the required fee(s), or credit any overpayment, to Deposit Account Number 16-0820 (enclose an extra copy of this form).

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(Authorized Signature)

Thomas P. Schiller(Date) 4/6/04**Thomas P. Schiller, Reg. No. 20677**

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1330.00 OP
300.00 OP
01 FC:1501
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Client Code: MAT

Docket No.: 33498

The fee address for communications relating to the patent to issue from this application:

Serial No. 09/836,617, filed 4 / 17 / 01

is:

CUSTOMER NUMBER: 00116

Thomas P. Schiller
Attorney of Record